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DATE: October 6, 2003

RECIPIENT INFORMATION

To: Examiner Jamisue A. Webb
Art Unit: 3761

Voice Tel. No.:

Fax Tel. No.: 1.703.872.9302

Your Ref.: 09/937,326

SENDER INFORMATION

From: Mary B. Grant

Voice Tel. No.: 1.919.941.8830

Sent By: Sandra

Our Ref.: 019219-013

Total Pages: 15 pages

MESSAGE:

Please see attached response to the Official Action mailed June 6, 2003.

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OFFICIAL

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(BDSM 8700)

Patent
Attorney Docket No. 019219-013

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Arie Cornelis BESEMER et al.

Application No.: 09/937,326

Filing Date: September 25, 2001

Title: Hygienic Absorbent with Odour Control

Group Art Unit: 3761

Examiner: Jamisue A. WEBB

Confirmation No.: 9428

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

☒ A Petition for Extension of Time is also enclosed.☐ Terminal Disclaimer(s) and the ☐ \$55.00 (2814) ☐ \$110.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.☐ Also enclosed is/are _____

_____☐ Small entity status is hereby claimed.☐ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$385.00 (2801) ☐ \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.☐ Applicant(s) previously submitted _____
_____ on _____
for which continued examination is requested.☐ Applicant(s) requests suspension of action by the Office until at least _____ which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

BURNS DOANE

AMENDMENT/REPLY TRANSMITTAL LETTER

Page 1 of 2

BURNS DOANE SWECKER & MATHIS LLP
ATTORNEYS AT LAW

Attorney Docket No. 019219-013Application No. 09/937,326☒ No additional claim fee is required.☐ An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims	10	MINUS 20 =	0	x \$18.00 (1202) =	\$ 0.00
Independent Claims	2	MINUS 3 =	0	x \$86.00 (1201) =	\$ 0.00
If Amendment adds multiple dependent claims, add \$290.00 (1203)					
Total Claim Amendment Fee					\$ 0.00
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					\$ 0.00
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 0.00

☐ A total fee in the amount of _____ is enclosed.☐ Charge _____ to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404
Alexandria, Virginia 22313-1404
(919) 941-9240

Date: October 6, 2003

By Mary B. Grant
Mary B. Grant
Registration No. 32,176

I hereby certify that this correspondence is being by facsimile transmission to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, to the following facsimile number:

Facsimile Number: 703.872.9302

Date of Transmission: October 6, 2003

Sandra B. Paye
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